Name in Full: Martha Gladden

Certificate of Death

Died at — Town: Vienna — County: Dorchester — MARYLAND

Date 1899 — Month: July — Day: 24 — Age: Y. 91 M. D. — Native of: Drummingtown — Occupation: Virginia

~~Male~~ ~~White~~ Married Widow Divorced

Female Colored ~~Single~~ ~~Widower~~ Number of children living 1

~~Husband~~ of Wife: Henry Gladden

Father's Name: dont know — Mother's Name: Sarah Seamer

Cause of Death — Primary: 57 — How long sick

Immediate: Old age & Heart trouble — Accident, Suicide, Homicide

Reported by: John S Willis

Address: Vienna Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister. A J Hutch

LIBRARY BUREAU, 79808

Attended by Dr. R. L. Price

of _____

Seen by Coroner _____

of _____

Name in Full: Joseph Horsey

Certificate of Death

Died at — Town: Cambridge — County: Dorchester — MARYLAND

Date 1899 — Month: 7 — Day: 1 — Age: Y. 65 M. about D. — Native of: Somerset Co — Occupation: Farmer

Male — ~~Wife~~ — ~~Married~~ — ~~Widow~~ — ~~Divorced~~

~~Female~~ — Colored — ~~Widower~~ — Number of children living: —

Husband of Wife: — See

Father's Name: Not known — Mother's Name: Not known

Cause of Death — Primary: Phthisis Florida 22 f — How long sick: 5 weeks about

Immediate: Profuse drawhand exhaustion — ~~Accident, Suicide, Homicide~~

Reported by: Guy Steele M.D.

Address: Cambridge Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full: Pholassa Hudson

Certificate of Death

Died at: Town: on Boat in River Mont. County: Dorchester — MARYLAND

Date 189 9 — Month: July — Day: 20 — Age: Y. 14 M. D. — Native of: Md — ~~Occupation~~: none

~~Male~~ ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

Female Colored Single ~~Widower~~ ~~Number of children~~ living

~~Husband of Wife~~

Father's Name: George Hudson — Mother's Name: Mary Hudson

Cause of Death — Primary: Hooping-Cough — How long sick: 3 weeks

Immediate — ~~Accident, Suicide, Homicide~~

Reported by: Wm W Evans

Address: Deals Island Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

The Child's Father took ill to

Attended by Dr. Nic Hitch twice

of Laurel Delaware

Seen by Coroner none

of

Information contained in this certificate received

from Geo. Hudson

of Dead Selena md

Name in Full Elmer J. Kennedy

Certificate of Death

Died at Town [illegible] County [illegible] MARYLAND

Date 1899, Month 7 Day 26 | Age Y. 22 M. 4 D. 10 | Native of md | Occupation [illegible]

~~Male~~ ~~White~~ Married Widow Divorced

Female Colored Single Widower Number of children living —

Husband of Wife —

176

Father's Name Peter Kennedy

Mother's Name Martin Kennedy

Cause of Death: Primary Injury of head

Immediate Fracture of skull

How long sick

~~Accident~~, ~~Suicide~~, Homicide

Reported by Peter Kennedy

Address Herlock [illegible]

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name In Full Elin C Lee

Certificate of Death

~~Town~~ County

Died at Dor MARYLAND

Date 189 9 July 28 (Month Day) Age Y. 10 M. 10 D. Native of Dorch Co Occupation

Male ~~White~~ ~~Married~~ Widow ~~Divorced~~

Female Colored Single ~~Widower~~ Number of children living

Husband ~~Wife~~ of Jno F Lee

Father's Name

Mother's Name Addie Lee

Cause of Death: Primary 161 — How long sick 3 mo

Immediate — ~~Accident, Suicide, Homicide~~

Reported by H H Willoughby

Address E N Market undertaker

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

101

Attended by Dr. Irme

of

Seen by Coroner

of

Name In Full

Certificate of Death

Benjamin Levin Marshal

Died at Town Griffin Neck County Dorchester MARYLAND

Date 1899 Month July Day 5 | Age Y. M. D. Seven | Native of month | Occupation

Male / ~~Female~~ | White / ~~Colored~~ | ~~Married~~ / Single | Widow / Widower | Divorced / Number of children living

Husband / Wife of

Father's Name Walter Marshal | Mother's Name Iola

Cause of Death: Primary | How long sick Seven month

Immediate dont know 161 | Accident, Suicide, Homicide

Reported by Harison Reid

Address Vienna Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister. A J Hitch

LIBRARY BUREAU, 79[illegible]

Attended by Dr. NC

of _____

Seen by Coroner _____

of _____

Name in Full: Alice Moore

Certificate of Death

Died at — Town: Cambridge — County: Dorchester — MARYLAND

Date 1899 — Month: July — Day: 28 — Age: Y. 28 M. about D. — Native of: Dorchester — Occupation: —

~~Male~~ ~~White~~ ~~Married~~ Widow ~~Divorced~~

Female Colored ~~Single~~ ~~Widower~~ ~~Number of children living~~

Husband / Wife of: Andrew Moore

Father's Name: J. H. Hooper

Mother's Name: Susan Cornish

Cause of Death — Primary: Pulmonary phthisis — How long sick: 18 months about

Immediate: Gradual apprentice 229 — ~~Accident, Suicide~~ Homicide

Reported by: Guy Steele

Address: Cambridge Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 68968

Name in Full Mollie Marshall

Certificate of Death

Died at Town Neck Dist. County Dorchester MARYLAND

Date 1899 Month July Day 18 | Age Y. 42 M. — D. — | Native of Dor. Co Md | Occupation Housewife

~~Male~~ White Married ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ ~~Single~~ ~~Widower~~ Number of children living 5

~~Husband~~ Wife of Thos N. W Heatley

Father's Name Lewis Marshall Mother's Name Nellie Marshall

Cause of Death
Primary ~~Convulsions~~ Uraemia
Immediate Convulsions. (Eclampsia

How long sick 15 hrs

~~Accident, Suicide, Homicide~~

Reported by S A Stokes M.D. 121

Address Cornersville Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Name in Full: Ida V. Nichols

Certificate of Death: 20

Died at: home no

Town: no

County: Dorchester yes

MARYLAND

Date 1899 Month: July Day: 20

Age: Y. 1 M. Day D.

Native of: Dor Co

Occupation:

Male: Male

~~White~~

~~Married~~

~~Widow~~

~~Divorced~~ no

~~Female~~

~~Colored~~ color

~~Single~~ single

Widower: no

Number of children living: none

Husband of Wife:

Father's Name: willie neal

Mother's Name: Ida V Nichols

Cause of Death:

Primary: Natural Born 161

Immediate: 24 Hours

How long sick: 1 day

Accident, Suicide, Homicide

Reported by: Eliza N Aulderridge

Address: Huslock Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Certificate of Death

Esther Ruth Short

Died — Town: near Cabin Creek County: Dorch — MARYLAND

Date 1899 Month: July Day: 20 | Age Y.: 3 M.: 4 D.: 20 | Native of: md | Occupation:

White / Colored — Male / Female — Married / Single — Widow / Widower — Divorced — Number of children living

Husband of
Wife

Father's Name: Samuel L. Short

Mother's Name: Mary Elizabeth Short

Cause of Death — Primary: Pertyosis 7 — How long sick: 6 weeks

Immediate: Exhaustion

Accident, Suicide, Homicide

Reported by: G. A. Haefner M.D.

Address: Hurlock Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Mr Geo. B. Walter

Certificate of Death

Died at Town Hollans Island County Dorchester Co MARYLAND

Date 1899 Month July Day 1 Age Y. 76 M. D. Native of Md Occupation Copton

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ Widow Widower Divorced Number of children living 10

Husband of Wife Sarah Walter

Father's Name Mother's Name

Cause of Death Primary Old age 141 How long sick

Immediate Accident, Suicide, Homicide

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 79898

Attended by Dr. Alexandreyx

of

Seen by Coroner

of

Information contained in this certificate re-
ceived from Chas P. Kelley

of Hollands Island

Name in Full | Certificate of Death

Harriett Elizabeth Woolford

Died at Town: Cambridge County: Dorchester MARYLAND

Date 1899 Month: July Day: 26 Age Y. - M. 10 D. about Native of Dor. Co. Occupation —

~~Male~~ ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

Female Colored ~~Single~~ ~~Widower~~ ~~Number of children living~~

Husband of Wife —

226

Father's Name James Thomas Mother's Name Sarah Francis Woolford

Cause of Death: Primary Tuberculosis General — How long sick 5 weeks about

Immediate Exhaustion from diarrhoea — ~~Accident, Suicide, Homicide~~

Reported by Guy Steele M.D.

Address Cambridge Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

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Name in Full

Edith Wrolin

Certificate of Death

Died at Town Cambridge County Dorchester MARYLAND

Date 189 9 Month July Day 13 Age Y. 9 M. 7 D. - Native of Md Occupation —

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ ~~Single~~ ~~Widower~~ ~~Number of children~~ living

Husband of Wife

Father's Name Jno. Wrolin

Mother's Name Mary Wrolin

Cause of Death

Primary Dysentery 84

How long sick

Immediate Internal Hemorrhage

~~Accident, Suicide, Homicide~~

Reported by John Marx M.D.

Address Cambridge Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

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